

SERVICE INVOICE		Invoice No.:	1			
<b>Paz Home Health, LLC</b>		Invoice Date:	5/11/2018			
1330 N. 10th St, Ste. 210 McAllen, TX 78501		Date Due:	5/15/2018			
Phone: 956-781-8445 Fax: 956-781-8448		pazpt09@gmail.com				
<b>Bill To:</b>	Reliq Health Technologies, Inc	<b>Phone:</b>	1-888-405-9549			
<b>Address:</b>	406A- 175 Longwood Rd S Hamilton, ON L8P QA1	<b>Fax:</b>	#N/A			
		<b>Email:</b>	gdelio@reliqhealth.com			
		<b>Contact:</b>	Giancarlo De Lio			
DATE	DESCRIPTION	RATE PER HOUR	HOURS	FLAT FEE	DISCOUNT	TOTAL
2016	Business Development, Clinical Input	\$0.00	0	\$280,000.00		\$280,000.00
2017	Business Development, Clinical Input	\$0.00	0	\$280,000.00		\$280,000.00
2018	Business Development, Clinical Input	\$0.00	0	\$280,000.00		\$280,000.00
						Invoice Subtotal
Make all checks payable to Paz Home Health, LLC.						Total \$840,000.00